PART B - FEE(S) TRANSMITTAL

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Sunnyvale, CA 9			(Depositor's name)					
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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	1	ATTORNEY DOCKET NO.		CONFIRMATION NO.]
10/673 020	09/25/2003		Quan Vu		SONY		9530	
TLE OF INVENTION: INFORMATION AND CONTENT EXCHANGE DOCUMENT TYPE DEFINITIONS TO SUPPORT CONTENT STRIBUTION								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOT	AL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	80		\$1810	03/08/2010	
EXAMINER ART UNIT			CLASS-SUBCLASS					
CHEA, PHILIP J		2453	709-230000	,				_
Change of correspondence address or indication of "Fee Address" (37 R. 1.563). — Change of correspondence address (or Change of Correspondence Address form PTOSB/122) attached. — On the Change of Correspondence Address form PTOSB/122 attached. — On the Address indication (or "Fee Address" Indication form PTOSB/147; Rev 0.3-02. or more recent) attached. Use of a Customer Number is required.			2. For printing on the pattern from page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name with be printed.					
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFA311. Completion of this form is NOT is substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STRATE OR COUNTRY) SONY CORPORATION SONY CORPORATION PARK RIDGE, NEW JERSEY Lesse check the appropriate assignee category or categorics (will not be printed on the patent): Individual Corporation or other private group entity Government								
a. The following fee(s) Issue Fee Publication Fee (N Advance Order -	lo small entity discount	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby sutherized to change the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number QB = 1275_ (enclose an extra copy of this form).						
a. Applicant claim	tus (from status indicate is SMALL ENTITY stated d Publication Fee (if re- records of the United St	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2), ed from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in k Office.						
Authorized Signature	/JONATHAL	Date MARCH 2, 2010 Registration No. 37,902 In is equired to obtain or reating a breefit by the public which is to fit (and by the USYTO to process) and it is equired to obtain or reating a breefit by the public which is to fit (and by the USYTO to process) and it is to the process of the information of the process of						
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